

EXHIBIT J

CERTIFICATE OF REGISTRATION



This Certificate issued under the seal of the Copyright Office in accordance with title 17, United States Code, attests that registration has been made for the work identified below. The information on this certificate has been made a part of the Copyright Office records.

REGISTER OF COPYRIGHTS
United States of America

FORM TX
UNITED STATES COPYRIGHT OFFICE

REGISTRATION NUMBER

3 443-890

TX

TXU

EFFECTIVE DATE OF REGISTRATION

Nov 23 1992
Month Day Year

DO NOT WRITE ABOVE THIS LINE. IF YOU NEED MORE SPACE, USE A SEPARATE CONTINUATION SHEET.

1 TITLE OF THIS WORK ▼

BATMAN RETURNS - MOVIE STORY BOOK #15954

PREVIOUS OR ALTERNATIVE TITLES ▼

PUBLICATION AS A CONTRIBUTION If this work was published as a contribution to a periodical, serial, or collection, give information about the collective work in which the contribution appeared. **Title of Collective Work ▼**

If published in a periodical or serial give: Volume ▼ Number ▼ Issue Date ▼ On Pages ▼

2 NAME OF AUTHOR ▼

DC COMICS INC.

DATES OF BIRTH AND DEATH
Year Born ▼ Year Died ▼

Was this contribution to the work a "work made for hire"? Yes No

AUTHOR'S NATIONALITY OR DOMICILE
Name of Country
Citizen of ▶ USA

WAS THIS AUTHOR'S CONTRIBUTION TO THE WORK
Anonymous? Yes No
Pseudonymous? Yes No
If the answer to either of these questions is "Yes," see detailed instructions

NATURE OF AUTHORSHIP Briefly describe nature of the material created by this author in which copyright is claimed. ▼
text throughout, two-dimensional artwork

NAME OF AUTHOR ▼

DATES OF BIRTH AND DEATH
Year Born ▼ Year Died ▼

* Was this contribution to the work a "work made for hire"? Yes No

AUTHOR'S NATIONALITY OR DOMICILE
Name of Country
Citizen of ▶

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Anonymous? Yes No
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Name of Country
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Anonymous? Yes No
Pseudonymous? Yes No
If the answer to either of these questions is "Yes," see detailed instructions

NATURE OF AUTHORSHIP Briefly describe nature of the material created by this author in which copyright is claimed. ▼

3 YEAR IN WHICH CREATION OF THIS WORK WAS COMPLETED This information must be given in all cases.
1992 ▶ Year

DATE AND NATION OF FIRST PUBLICATION OF THIS PARTICULAR WORK

Complete this Information Month ▶ July Day ▶ 15 Year ▶ 1992 Nation ▶

4 COPYRIGHT CLAIMANT(S) Name and address must be given even if the claimant is the same as the author given in space 2.▼

DC COMICS INC.

1325 Avenue of the Americas, 27th Floor
New York, NY 10019

TRANSFER If the claimant(s) named here in space 4 are different from the author(s) named in space 2, give a brief statement of how the claimant(s) obtained ownership of the copyright.▼

APPLICATION RECEIVED

NOV 23 1992

ONE DEPOSIT RECEIVED

TWO DEPOSITS RECEIVED

NOV 23 1992

REMITTANCE NUMBER AND DATE

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MORE ON BACK ▶

- Complete all applicable spaces (numbers 5-11) on the reverse side of this page.
- See detailed instructions.
- Sign the form at line 10.

DO NOT WRITE HERE

Page 1 of 1 J. Janes

DCC_000043

See instructions
before completing
this space.

TX 3 443-890

EXAMINED BY *AS*

FOR

CHECKED BY

 CORRESPONDENCE
YesFOR
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OFFICE
USE
ONLY

DO NOT WRITE ABOVE THIS LINE. IF YOU NEED MORE SPACE, USE A SEPARATE CONTINUATION SHEET.

PREVIOUS REGISTRATION Has registration for this work, or for an earlier version of this work, already been made in the Copyright Office?

 Yes No If your answer is "Yes," why is another registration being sought? (Check appropriate box) ▼

a. This is the first published edition of a work previously registered in unpublished form.

b. This is the first application submitted by this author as copyright claimant.

c. This is a changed version of the work, as shown by space 6 on this application.

If your answer is "Yes," give: Previous Registration Number ▼

Year of Registration ▼

5

DERIVATIVE WORK OR COMPILATION Complete both space 6a & 6b for a derivative work; complete only 6b for a compilation.

a. Preexisting Material Identify any preexisting work or works that this work is based on or incorporates. ▼

loosely based on motion picture

6

b. Material Added to This Work Give a brief, general statement of the material that has been added to this work and in which copyright is claimed. ▼

text adaptation, revised artwork

See instructions
before completing
this space

7

—space deleted—

8

REPRODUCTION FOR USE OF BLIND OR PHYSICALLY HANDICAPPED INDIVIDUALS A signature on this form at space 10, and a check in one of the boxes here in space 8, constitutes a non-exclusive grant of permission to the Library of Congress to reproduce and distribute solely for the blind and physically handicapped and under the conditions and limitations prescribed by the regulations of the Copyright Office: (1) copies of the work identified in space 1 of this application in Braille (or similar tactile symbols); or (2) phonorecords embodying a fixation of a reading of that work; or (3) both.

 a Copies and Phonorecords b Copies Only c Phonorecords Only

See instructions

9

DEPOSIT ACCOUNT If the registration fee is to be charged to a Deposit Account established in the Copyright Office, give name and number of Account.

Name ▼

WESTERN PUBLISHING COMPANY, INC.

Account Number ▼

DAO 18139

CORRESPONDENCE Give name and address to which correspondence about this application should be sent. Name/Address/Apt/City/State/Zip ▼
Susan D. Wishaw, Legal Department

Western Publishing Company, Inc.

Racine, WI 53404

Area Code & Telephone Number ▶ 414-631-5196

Be sure to
give your
daytime phone
number

10

CERTIFICATION* I, the undersigned, hereby certify that I am the

Check one ▶

author

other copyright claimant

owner of exclusive right(s)

authorized agent of DC COMICS INC.

Name of author or other copyright claimant, or owner of exclusive right(s) ▲

of the work identified in this application and that the statements made by me in this application are correct to the best of my knowledge.

Typed or printed name and date ▼ If this application gives a date of publication in space 3, do not sign and submit it before that date.

Susan D. Wishaw

date ▶

11/20/92



Handwritten signature (X) ▼

*Susan D. Wishaw*MAIL
CERTIFI-
CATE TO

Name ▼	Susan D. Wishaw, Legal Department Western Publishing Company, Inc.
Number/Street/Apartment Number ▼	1220 Mound Avenue
City/State/ZIP ▼	Racine, WI 53404

Certificate
will be
mailed in
window
envelopeYOURS
* Complete all necessary spaces
* Sign your application in space 10
SEND ALL 3 ELEMENTS
IN THE SAME PACKAGE

1. Application form
2. Nonrefundable \$20 filing fee
in check or money order
payable to Register of Copyrights
3. Deposit material

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Washington, D.C. 20559

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